TOWN OF DAVIE 6591 S.W. 45 STREET DAVIE, FLORIDA 33314 (954)797-1112

## HOME OCCUPATIONAL LICENSE APPLICATION

INSTRUCTIONS: For each Business Location in the Town of Davie, please complete an application. Once completed, return the application to the Occupational License division located at Town Hall.

APPLICANTS: COMPLETE BOTH SIDES OF APPLICATION	
BUSINESS NAME: Dand J Sheet Metal Inc.	
BUSINESS STREET ADDRESS: 8320 SW 55 ct	ZIP 33328
BUSINESS MAILING ADDRESS: 8320 SW 55 t	ZIP 33328
BUSINESS PHONE: 954 680 49 64	uct of the business
DESCRIBE TYPE OF BUSINESS: Sheet Metal Allwork d	one at Job site
BUSINESS IS: Corporation V Sole Proprietor Partnership	
Owner/Officer (s) Home Address City/Zip	Phone#
1. Donald Peak 9320sw55th 33328	954 4345 429
5 home address as the place of business for the the purpose of complying a	with the following
Federal ID Number or Social Security Number	the use of his own ration may list his
This application for home occupational license allows mail and te only, no signs or exterior storage, no on-site employees are permit	lephone use itted.
Print Owner or Officers Name and Title Signature of Owner o	r Officer
Office Use Only: Date 20 05 category Fee Exempt per Sec. 13-13 Ne   License # 05 2015 Control # 10835 Zoning   Council approval Required Yes No Zoning Approval Date	wTrans A-1 1/25/05
Town Council Date Denied	to pa
Tabled To Approved Denied	
OCCUPATIONAL LICENSE DEPARTMENT APPROVAL	
OWNER SIGNATURE REQUIRED ON BACK OF API	PLICATION
LOC IP 300585%.	-41-33-10-01

\* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \*

## THIS PAGE

## **INTENTIONALLY**

LEFT BLANK

\* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \* \*